APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

* RECEIVED SUPERVISOR OF ELECTIONS LEON COUNTY, FLORIDA

2021 NOV 15 P 2: 10

officer before opening the campaign account.			OFFICE USE ONLY										
1. CHECK APPROPRIATE BOX(E	ES):												
	e-filing to Change:	T	reasur	er/Deputy] D	eposito	ory		Office		Party	
2. Name of Candidate (in this order: First, Middle, Last) Dustin Ryan Rivest				3. Address (include post office box or street, city, state, zip code) 8227 Laurel Kay Ln.									
The state of the s	E-mail address est.dustin@gmail.com			Tallahassee, FL 32317									
Office sought (include district, circuit, group number) Leon County Commission District 5			7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate.										
8. If a candidate for a <u>partisan</u> of	fice, check block	and fil	l in naı	ne of part	y as	арр	licable	e: M	y inter	nt is to ru	n as a		
Write-In No Party At	filiation								_ Part	y can	didate.		
9. I have appointed the following person to act as my													
10. Name of Treasurer or Deputy ⁻ Dustin Rivest	Treasurer												
11. Mailing Address 223 W carolina st.				12. Telephone (850) 5663789									
13. City 14. Tallahassee Leon	County า	ate 3	te 16. Zip Code 17. E-mail address 32301 Rivest.Dustin@gmai						nail.com	1			
18. I have designated the following bank as my													
19. Name of Bank Prime Meridian Bank			20. Address 1471 Timberlane Road										
21. City Tallahassee				23. State Florida						24. Zip Code 32312			
UNDER PENALTIES OF PERJURY, I DE DESIGNATIO	CLARE THAT I HAVE I N OF CAMPAIGN DEP									IPAIGN TR	EASURE	ER AND	
25. Date			26. Signature of Candidate										
11-15-21			X	Lus	1	2							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)													
1, Dustin Rivest (Please Print or Type Name)				, do hereby accept the appointment									
designated above as:	Campaign T	reasure	er	Depu	ty Tre	easu	rer.						
11 - 15 - 21 Date		X	Signa	ture of Car	mpai	ign T	reasur	er or l	Deputy	y Treasui	er		

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED SUPERVISOR OF ELECTIONS LEON COUNTY, FLORIDA

2021 NOV 15 P 2: 10

1, Dustin Ryan Rivest
candidate for the office of County Commission District 5;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.
Signature of Candidate 1 - 15 - 21 Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).